



Community Development Department
6400 El Verde Road
Leon Valley, Texas 78238
Phone: (210) 684-1391 x 226 Fax: (210) 509-8288
e.dominquez@leonvalleytexas.gov
BUILDING PERMIT APPLICATION

REQUIREMENTS: (1) Building Permit Application, (2) Plot Plans,
(3) Building Plans with Specifications (Residential 3 sets; Commercial 4 sets) and Digital Version
NOTE: Allow up to 2 weeks for Plan Reviews and Permits
Reinspection fee: \$40.00

Date: _____ **Permit #:** _____

Part I. - Location of Building (PLEASE PRINT or TYPE)

Location: _____ **Zoning District:** _____

Subdivision: _____ **Lot:** _____ **Block:** _____ **CB:** _____

Part II. - Type, Registration, Cost

A. Type of Improvement

1. ☐ New Building Type: _____
2. ☐ Addition
3. ☐ Alteration
4. ☐ Repair or Replacement
5. ☐ Demolition
6. ☐ Moving (relocation)
7. ☐ Foundation Only
8. ☐ Storage Bldg./Shed Only

C-1. Commercial Registration

- ☐ Asbestos Survey included
(For Existing Structures Only)

**Texas Department of Licensing
and Regulation (TDLR)**

**Registration
#:** _____

D. Cost/Retail Value of Project

= _____

**Part III. - Plan Details/Project
Specifications/Foundation/Materials**
(Complete Sections E-I, if applicable)

E. New Building Dimensions

1st Story: _____ 2nd Story: _____

No. of Rooms: _____ No. of Rooms: _____

No. of Bath: _____ No. of Bath: _____

Garage: _____ Storage Shed: _____

**Total Square Footage of
New Building Project:** _____

B. Project Type

1. ☐ Commercial—**projects over \$50,000
complete Section C-1**
2. ☐ Residential—**projects over \$20,000
complete Section C-2**

C-2. Residential Registration

**Texas Residential Construction
Commission (TRCC)**

**Registration
#:** _____

F. Current Dimensions (pertains to existing
buildings, additions, alterations, repairs,
demolitions, and relocations only)

1st Story: _____ 2nd Story: _____

No. of Rooms: _____ No. of Rooms: _____

No. Bathrooms: _____ No. Bathrooms: _____

Garage: _____ Storage Shed: _____

Square Footage of Existing Project: _____

G. Altered Dimensions (pertains to
existing buildings, additions, alterations,
repairs, demolitions, and relocations only)

1st Story: _____ 2nd Story: _____

No. of Rooms: _____ No. of Rooms: _____

No. Bathrooms: _____ No. Bathrooms: _____

Garage: _____ Storage Shed: _____

**Total Altered Square Footage of the
Proposed Project:** _____

H. Foundation

Dimensions: _____

Total Square Footage: _____

I. Materials

Floors: _____

Roof: _____

Exterior Walls: _____

Interior Walls: _____

*****CALL FOR NEXT DAY INSPECTIONS*****

Revised 8/15ec

Part IV. Notification/Identification Information (complete Sections J-L)

J. Owner/Lessee Information Name: _____ Address: _____ _____ Phone No.: _____ Fax No.: _____ Email Address: _____	K. Contractor Information Name: _____ Address: _____ _____ Phone No.: _____ Fax No.: _____ Email Address: _____	L. Architect/Engineer Name: _____ Address: _____ _____ Phone No.: _____ Fax No.: _____ Email Address: _____
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NOTICE

Separate **permits** are **required** for **Electrical, Plumbing, Heating, Gas, Ventilation/Air Conditioning, Fences and Signs**. This permit becomes null and void if work or construction authorized is not commenced within 6 months, or if construction or work is suspended or abandoned for a period of 6 months at any time after work is commenced.

I hereby certify that I have read and examined this application and know the same to be true and correct. Provisions of the adopted 2015 Uniform Building Code as well as laws and ordinances governing this type of work will be complied with whether specified herein or not. The granting of a permit does not presume to give authority to violate or cancel the provisions of any other state or local law regulating construction or the performance of construction.

Signature of Applicant

Date _____

[illegible]

Section VI. Validation by Building Official

Circle/Highlight Items that are Required:

1. Zoning Change	2. Off-Street Parking	3. Fire Marshall Review
4. Specific Use Permit	5. Health License/Review	6. Landscaping
7. Building Inspection	8. Public Works Review	9. Floodplain Permit
10. Platting/Replatting	11. Electric Inspection/Review	12. Water & Sewer

Provide the Following:

Occupancy Class:_____

Construction Class:_____

COMMENTS/*CONDITIONS:_____
